

#### CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

# STATEMENT OF ECONOMIC INTERESTSECTIVED Date Received Official Use Only FAIR POLITICAL COVER PAGE PRACTICES COMMISSION

Please type or print in ink.	'	2013 MAR 25 PM 1: 25		
NAME OF FILER (	LAST)	(FIRST) (MIDDLE)		
Mitchell	Judith	М.		
1. Office, Agency, or Court				
Agency Name				
City of Rolling Hills Estates				
Division, Board, Department, District, if a	pplicable	Your Position		
		Mayor Pro Tem		
▶ If filing for multiple positions, list below	w or on an attachment.			
Agency:		Position:		
2. Jurisdiction of Office (Check a	it least one box)			
State		☐ Judge or Court Commissioner (Statewide Jurisdiction)		
Multi-County		County of		
City of Rolling Hills Estates		□ Other		
<u> </u>				
3. Type of Statement (Check at lea	ast one box)			
✓ Annual: The period covered is Jan	uary 1, 2012, through	Leaving Office: Date Left/		
December 31, 2012.		(Check one)		
The period covered is December 31, 2012.	, through	The period covered is January 1, 2012, through the date of leaving office.		
Assuming Office: Date assumed _		The period covered is, through the date of leaving office.		
Candidate: Election year	and office sought, if d	lifferent than Part 1:		
4. Schedule Summary		~		
Check applicable schedules or "None.	" ► Total :	number of pages including this cover page:		
Schedule A-1 - Investments - sched		Schedule C - Income, Loans, & Business Positions - schedule attached		
Schedule A-2 - Investments – sched	dule attached			
Schedule B - Real Property - sched	Jule attached	Schedule E - Income - Gifts Trayer Payments - Schedule attached		
	-01-			
	None - No reportable interes	ts on any schedule MAR 2 1 2013		
5 Verification				
I certify under penalty of perjury unde	r the laws of the State c			
Date Signed 03/21/2013				
(month, day, year	)			

### **SCHEDULE A-1 Investments**

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Judith M. Mitchell

•	NAME OF BUSINESS ENTITY	<b>•</b>	NAME OF BUSINESS ENTITY
	BMC Software	1	
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	Technology		
	FAIR MARKET VALUE	l	FAIR MARKET VALUE
	<b>☑</b> \$2,000 - \$10,000 ☐ \$10,001 - \$100,000	i	\$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000		S100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT	1	NATURE OF INVESTMENT
	Stock Other	l	Stock Other
	(Describe)  Partnership O Income Received of \$0 - \$499	•	(Describe) Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)		O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	/ / 12 01 / 30 / 12	l	
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
_	NAME OF BUSINESS ENTITY	<b> </b>	NAME OF BUSINESS ENTITY
	EMC Corp	ı	
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	Technology		
	FAIR MARKET VALUE		FAIR MARKET VALUE
	<b>[</b> ] \$2,000 - \$10,000	i	\$2,000 - \$10,000 \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$100,001 - \$1,000,000 Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	Stock Other		
	(Describe) Partnership O Income Received of \$0 - \$499		(Describe) Partnership (O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)		O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	·		II AFFEIGABLE, EIST DATE.
	<u></u>		
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
<b>&gt;</b>	NAME OF BUSINESS ENTITY	>	NAME OF BUSINESS ENTITY
	Oracle Corp.	•	
	GENERAL DESCRIPTION OF BUSINESS ACTIVITY	l	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
	EAID MADVET VALUE		FAID MADVET VALUE
	FAIR MARKET VALUE  ☐ \$2,000 - \$10,000  ☐ \$2,000 - \$100,000	l	FAIR MARKET VALUE  \$2,000 - \$10,000  \$10,001 - \$100,000
	\$100,001 - \$1,000,000 Over \$1,000,000		\$2,000 - \$10,000   \$10,001 - \$100,000   \$10,001 - \$1,000,000   Over \$1,000,000
	NATURE OF INVESTMENT		NATURE OF INVESTMENT
	▼ Stock  Other(Describe)		Stock Other (Describe)
	Partnership O Income Received of \$0 - \$499		Partnership O Income Received of \$0 - \$499
	O Income Received of \$500 or More (Report on Schedule C)		O Income Received of \$500 or More (Report on Schedule C)
	IF APPLICABLE, LIST DATE:		IF APPLICABLE, LIST DATE:
	ACQUIRED DISPOSED		ACQUIRED DISPOSED
	•	•	
Cc	mments:		

### **SCHEDULE A-2** Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)

CALIFORNIA FORM	700 COMMISSION
Name	
Judith M. Mitchell	

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST		
Judith M. Mitchell Trust of 11-11-99	Judith M. Mitchell, Attorney		
Name	Name		
62 Hidden Valley Road, Rolling Hills Estates, CA 90274	62 Hidden Valley Road, Rolling Hills Estates, CA		
Address (Business Address Acceptable)	Address (Business Address Acceptable)		
Check one  Trust, go to 2 Business Entity, complete the box, then go to 2	Check one ☐ Trust, go to 2 ☑ Business Entity, complete the box, then go to 2		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		
	Law Practice		
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:		
☐ \$0 · \$1,999	☐ \$0 - \$1,999		
\$2,000 - \$10,000	\$2,000 - \$10,000		
\$100,001 - \$1,000,000	\$100,001 - \$1,000,000		
Over \$1,000,000	Over \$1,000,000		
NATURE OF INVESTMENT	NATURE OF INVESTMENT		
Partnership Sole Proprietorship Other	Partnership V Sole Proprietorship Other		
	VOLID BUSINESS POSITION Attorney		
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION Autometry		
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)		
	□ \$0 - \$499		
\$500 - \$1,000 OVER \$100,000	\$500 - \$1,000 OVER \$100,000		
\$1,001 - \$10,000	\$1,001 - \$10,000		
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE. (Attach a separate sheet of necessary)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)		
✓ None	None		
	Huang PC, Lawyers		
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR		
LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:	LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:		
✓ INVESTMENT REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY		
Pacific Ocean Partners, Ltd.			
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, <u>or</u> Assessor's Parcel Number or Street Address of Real Property		
Limited Partnership, 2665 30th Street, Santa Monica	Assessor's Parcer Number of Street Address of Real Property		
Description of Business Activity or	Description of Business Activity or		
City or Other Precise Location of Real Property	City or Other Precise Location of Real Property		
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE:		
\$2,000 - \$10,000 \$\sqrt{12}  \frac{12}{2}  \frac{12}{2}	\$2,000 - \$10,000 \$10,001 - \$100,000		
\$100,001 - \$1,000,000 ACQUIRED DISPOSED	\$100,001 - \$1,000,000 ACQUIRED DISPOSED		
Over \$1,000,000	Over \$1,000,000		
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST		
	Property Ownership/Deed of Trust Stock Partnership		
Leasehold Yrs. remaining Other Limited Partnership	Leasehold Other		
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached		
Comments, See Attachment A-2	FPPC Form 700 (2012/2013) Sch. A-2		
Comments:	FPPC Advice Fmail: advice@fppc.ca.gov		

### SCHEDULE A丼 2 **Investments**

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Judith M. Mitchell

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
Microsoft	Consolidated Edison		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		
Technology	Energy		
FAIR MARKET VALUE	FAIR MARKET VALUE		
<u> </u>	<b>□</b> \$2,000 - \$10,000 □ \$10,001 - \$100,000		
\$2,000 - \$10,000  \$100,000 \$100,001 - \$1,000,000  Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000		
NATURE OF INVESTMENT	NATURE OF INVESTMENT		
✓ Stock Other (Describe)	Stock Other (Describe)		
Partnership   Income Received of \$0 - \$499   Income Received of \$500 or More (Report on Schedule C)	Partnership   Income Received of \$0 - \$499   Income Received of \$500 or More (Report on Schedule C)		
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
ACQUIRED DISPOSED	ACQUIRED DISPOSED		
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
AT&T	CVS Caremark		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		
Telephone	Retail Drugstores		
FAIR MARKET VALUE	FAIR MARKET VALUE		
<b>2</b> \$2,000 - \$10,000	<b>2</b> \$2,000 - \$10,000		
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000		
NATURE OF INVESTMENT	NATURE OF INVESTMENT		
	Stock Other		
(Describe)	(Describe)		
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
// 12/ 12 ACQUIRED DISPOSED	//		
ACQUIRED BISPOSED	ACQUIRED DISPOSED		
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY		
CACI International	Northwest Natural Gas		
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY		
Technology	Energy		
FAIR MARKET VALUE	FAIR MARKET VALUE		
	<b>2</b> \$2,000 - \$10,000		
[] \$100,001 - \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000		
NATURE OF INVESTMENT	NATURE OF INVESTMENT		
	Stock Other		
(Describe)	(Describe)		
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)		
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:		
/ / 12 / / 12	/ / 12 / / 12		
ACQUIRED DISPOSED	ACQUIRED DISPOSED		
Madelline Diel Oakh	ACQUIRED DISPOSED		
Comments:			
Consideration			

# SCHEDULE APT 2. Investments

#### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
Judith M. Mitchell

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
J C Penney	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Retail	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 <b>[</b> ] \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT   ✓ Stock	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/ / 12 / / 12
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Vectren	
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Energy	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
Ç	,
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
<b>.</b>	I .
Comments:	

## SCHEDULE D Income - Gifts



Judith M. Mitchell

NAME OF SOURC	E (Not an Acronym)		► NAME OF SOURCE	E (Not an Acronym	)
ADDRESS (Busines	ss Address Acceptab za, Suite 600, I	e) PMB 183 Irvine, CA 9261	ADDRESS (Busines	ss Address Accepta	ble)
	TY, IF ANY, OF SOU		BUSINESS ACTIVIT	TY, IF ANY, OF SO	URCE
Transportation	n				
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09, 28, 12	\$87.00	Disneyland Ticket		\$	PROBLEM STATE OF STAT
	\$			\$	
	\$			\$	
NAME OF SOURCE	E (Not an Acronym)		► NAME OF SOURCE	E (Not an Acronym,	)
ADDRESS (Busines	ss Address Acceptab	le)	ADDRESS (Busines	ss Address Accepta	ble)
BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	TY, IF ANY, OF SO	URCE
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$			\$	
	\$			\$	
	\$			\$	
NAME OF SOURCE	E (Not an Acronym)		► NAME OF SOURCE	E (Not an Acronym,	)
ADDRESS (Busines	ss Address Acceptab	le)	ADDRESS (Busines	s Address Accepta	ble)
BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	TY, IF ANY, OF SO	URCE
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
	\$			\$	
	\$			\$	
	\$			\$	
Comments:					

### SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

Name	0		
Judith M. Mitchell			

- You must mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the \$440 gift limit, but may result in a disqualifying conflict of interest.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
League of California Cities	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1400 K Street	
CITY AND STATE	CITY AND STATE
Sacramento, California 95814	
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
Advocacy for cities and their residents	
DATE(S): 01 / 19 / 12 - 03 / 29 / 12 AMT: \$ 75.00	DATE(S):/
TYPE OF PAYMENT: (must check one) 🔲 Gift 🛛 Income	TYPE OF PAYMENT: (must check one)
Made a Speech/Participated in a Panel	☐ Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
Meals for volunteer services as a member of	
Environmental Quality Policy Committee	
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S):	DATE(S):/ AMT: \$
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one)   Gift   Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
	Lad Street Frontier Bosonpaon
	11
Comments:	